Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 1 of 67

| Fill in this information to identify your case:                         |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:  Northern District of: Illinois |                               |
| (State)   | Chapter you are filing under: |
| · · · · · · · · · · · · · · · · · · ·                                   | ✓ Chapter 7 Chapter 11        |
|   | Chapter 12 Chapter 13         |

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself  |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  | Shemika                    |   |
|    | Write the name that is on   | First name                 | First name                                    |
|    | your government-issued picture identification (for example, your driver's | Middle name                | Middle name                                   |
|    | license or passport   | Robinson<br>Last name      | Last name                                     |
|    | Bring your picture identification to your meeting with the trustee.       | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last<br>8 years  | First name                 | First name                                    |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social                                     | XXX - XX5581               | XXX - XX-                                     |
|    | Security number or federal Individual                                     | OR                         | OR  |
|    | Taxpayer Identification number (ITIN)                                     | 9 xx - xx-                 | 9 xx - xx-                                    |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 2 of 67

| Debtor 1 Shemika<br>First Name                               | Robinson Middle Name Last Name   | Case number (if known)   |
|--|--|--|
|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                           | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name  | Business name  |
| 8 years Include trade names and                              | Business name  | Business name  |
| doing business as names                                      | EIN  | EIN  |
|  | EIN  | EIN  |
| 5. Where you live  | 7743 S Sawyer Ave  | If Debtor 2 lives at a different address:  |
|  | Number Street  | Number Street  |
|  | Chicago Illinois 60652 City State Zip Code   | City State Zip Code  |
|  | Cook<br>County   | County   |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                            | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  | Number Street  | Number Street  |
|  | City State Zip Code  | City State Zip Code  |
| 6. Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have   | Check one:  Over the last 180 days before filing this petition, I have   |
| to me for bank aptoy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)                        |
|  | Thave another reason. Explain. (See 20 0.3.0. 99 1400.)  | 1 Triave another reason. Explain. (See 25 0.3.0. §§ 1400.)   |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 3 of 67

Robinson Debtor 1 Shemika Case number (if known) Middle Name First Name Last Name Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for **Bankruptcy Code you** Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ✓ No. bankruptcy within the last 8 years? Yes. District MM / DD / YYYY When District District Case number \_\_ MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Relationship to you \_\_\_ Yes. Debtor spouse who is not When Case number, if known filing this case with MM / DD / YYYY you, or by a business Relationship to you \_ partner, or by an Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 4 of 67

Robinson Debtor 1 Shemika Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 5 of 67

Debtor 1 Shemika Robinson Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 6 of 67

Debtor 1 Shemika Robinson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$1,000,001-\$10 million \$0-\$50,000 \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Shemika Robinson Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 12/1/2016 Executed on MM / DD / YYYY MM / DD / YYYY

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 7 of 67

| Debtor 1 Shemika                                 |                            | Robinson               | Case number (if k         | nown)  |
|--|----------------------------|------------------------|---------------------------|--|
| First Name                                       | Middle Name                | Last Name              | <u> </u>                  |  |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12, | or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. § 34 | 42(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the in | formation in the schedu   | ules filed with the petition is incorrect.   |
| attorney, you do not                             | •                          | , ,                    |                           | •  |
| need to file this page.                          | /s/ Alex Nohr              |                        | Date                      | 12/1/2016  |
|  | Signature of Attorney f    | or Debtor              | M                         | M / DD / YYYY  |
|  |                            |                        |                           |  |
|  |                            |                        |                           |  |
|  | Alex Nohr                  |                        |                           |  |
|  | Printed name               |                        |                           |  |
|  |                            |                        |                           |  |
|  | Semrad Law Firm            |                        |                           |  |
|  | Firm name                  |                        |                           |  |
|  | 20 S. Clark Street         |                        |                           |  |
|  | Street                     |                        |                           |  |
|  | 28th Floor                 |                        |                           |  |
|  |                            |                        |                           |  |
|  | Chicago                    |                        | Illinois                  | 60603  |
|  | City                       |                        | State                     | Zip Code   |
|  |                            |                        |                           |  |
|  | Contact phone              | 3122543168             | Email address             | ANohr@SemradLaw.com  |
|  |                            |                        |                           |  |
|  |                            |                        |                           |  |
|  | Bar number                 |                        | State                     |  |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 8 of 67

| Fill in this infor        | mation to identify your ca | ase:        |                      |
|---------------------------|----------------------------|-------------|----------------------|
| Debtor 1                  | Shemika                    |             | Robinson             |
|                           | First Name                 | Middle Name | Last Name            |
| Debtor 2                  |                            |             |                      |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois |
| Case number<br>(lf known) |                            |             | (State)              |

| Check if this is an |
|---------------------|
| amended filing      |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets<br>Value of what you own      |
|--|---|
| Schedule A/B: Property (Official Form 106A/B)  | \$50,000.00                               |
| 1a. Copy line 55, Total real estate, from Schedule A/B   |   |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$10,040.00                               |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$60,040.00                               |
| Summarize Your Liabilities   |   |
|  | <b>Your liabilities</b><br>Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                   | \$129,017.00                              |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Ψ123,017.00                               |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00                                    |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$67,956.00                               |
| Your total liabilities   | \$196,973.00                              |
| art 3: Summarize Your Income and Expenses  |   |
|  | 40.101.00                                 |
| . Schedule I: Your Income (Official Form 106I)   |   |
| . Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I       | \$2,151.09<br>—                           |

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 9 of 67

Robinson Debtor 1 Shemika \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,388.78 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$48,392.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$48,392.00

9g. Total. Add lines 9a through 9f.

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 10 of 67

| Fill in this                                      | information to identify your ca  | ase:   |   |  |  |   |
|---|--|--|---|--|--|---|
| Debtor 1  | Shemika  |  | Robinson  |  |  |   |
| Debtor 2  | First Name   | Middle Nan   | ne Last Name  | •  |  |   |
| (Spouse, if fi                                    | iling) First Name  | Middle Nan   | ne Last Name  | •  |  |   |
| United Sta  | ates Bankruptcy Court for the:   | Northern   | District of Illinois  | S  |  |   |
| Case num  | nber   |  | (State  | )  |  |   |
| Officia   | al Form 106A/B   |  |   |  |  | Check if this is an amended filing  |
| Sche  | dule A/B: Prope  | rty  |   |  |  | 12/1  |
| category v<br>responsibl<br>write your<br>Part 1: | ategory, separately list and dowhere you think it fits best. Ble for supplying correct informance and case number (if kinds bescribe Each Residence a own or have any legal or equal to the control of th | e as complete and<br>mation. If more spa<br>nown). Answer eve<br>e, Building, Land | accurate as possible. I<br>ce is needed, attach a<br>ry question.<br>I, or Other Real Esta  | f two married people<br>separate sheet to th<br>te You Own or Ha | e are filing together, both a<br>is form. On the top of any a<br>we an Interest In | are equally   |
| Щ   | No. Go to Part 2   |  |   |  |  |   |
| 1.1   | Street address, if available, or control of the street address.  | [  | What is the property? Cl ✓ Single-family home  Duplex or multi-unit b   |  | the amount of any secu   | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>nims Secured by Property.                           |
|   | Number Street  |  | Condominium or coo  | perative   | Current value of the entire property? \$100000.00                                  | Current value of the portion you own? \$50000.00  |
|   | Chicago Illinois City State  Cook County   | 60652<br>Zip Code  | Land Investment property Timeshare Other  |  | Describe the nature of interest (such as fee sthe entireties, or a life            | simple, tenancy by  |
|   | •  | L  |   |  |  | ommunity property   |
|   |  | [<br>[<br>[<br>]   | Who has an interest in tone.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 ✓ At least one of the debutor of the de | ? only<br>otors and another                                      | (see instructions)   |   |
| If you  | own or have more than one, lis   |  | <b>M</b>  |  | De rest deduct second  | alaima an anasastiana Dut   |
| 1.2   | Street address, if available, or o   |  | Mhat is the property? Company Single-family home  Duplex or multi-unit book Condominium or cool  Manufactured or mobout Land  | uilding<br>perative  | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.  Current value of the portion you own? |
|   | Number Street  City State  | Zip Code   | Investment property Timeshare Other   |  | Describe the nature of interest (such as fee stee the entireties, or a life        | simple, tenancy by  |
|   |  | [<br>[<br>[<br>[   | Who has an interest in tone.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2  At least one of the debtor 2  Other information you we property identification in  | 2 only<br>otors and another<br>vish to add about this            | (see instructions)   | ommunity property   |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 11 of 67

| Debtor 1             |  |  | Robinson Case numb   | er (if known)  |   |
|----------------------|--|--|--|--|---|
|                      | First Name   | Middle Name                                | Last Name  |  |   |
| 1.3 <u></u><br>Stre  | et address, if available, or o                                 | ther description                           | What is the property? Check all that apply.  Single-family home  | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. |
|                      |  |  | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home   | Current value of the entire property?                                    | Current value of the portion you own?   |
| Nun                  | nber Street  | Zip Code                                   | Land Investment property Timeshare Other   | Describe the nature of interest (such as fee s the entireties, or a life | mple, tenancy by  |
| 2. Add<br>you ha<br> | the dollar value of the pove attached for Part 1. W            | ertion you own for<br>rite that number<br> | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item property identification number:  Tall of your entries from Part 1, including any entries | es for pages \$50  | mmunity property  |
|                      | ans, trucks, tractors, sport u                                 |  | •  | TOTTEXPITED LEASES.  |   |
| 3.1                  | Make<br>Model:<br>Year:  | Dodge<br>Avenger<br>2014                   | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secu   | claims or exemptions. Pured claims on <i>Schedule Lims Secured by Property.</i>     |
|                      | Approximate mileage: Other information: 2014 Dodge Avenger: RE | 60000<br>AFFIRM                            | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another   | Current value of the entire property? \$7400.00                          | Current value of the portion you own? \$7400.00                                     |
|                      | Mala   |  | Check if this is community property (see instructions)   | D  |   |
| 3.2                  | Make<br>Model:<br>Year:  |  | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secu   | claims or exemptions. Pured claims on <i>Schedule Lims Secured by Property.</i>     |
|                      | Approximate mileage: Other information:                        |  | Debtor 2 only Debtor 1 and Debtor 2 only   | Current value of the entire property?                                    | Current value of the portion you own?   |
|                      |  |  | At least one of the debtors and another  Check if this is community property (see instructions)  |  |   |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 12 of 67

|             | Shemika  |             |   |                                    | (if known)   |  |
|-------------|--|-------------|---|------------------------------------|--|--|
|             | First Name   | Middle Name | Last Name   |                                    |  |  |
| 3.3         | Make<br>Model:<br>Year:  |             | Who has an interest in the property? one.  Debtor 1 only  |                                    | Do not deduct secured<br>the amount of any secu<br>Creditors Who Have Cla  | red claims on <i>Schedul</i>   |
|             | Approximate mileage:   |             | Debtor 2 only   |                                    | Current value of the   | Current value of the   |
|             | Other information:   |             | Debtor 1 and Debtor 2 only  |                                    | entire property?   | portion you own?   |
|             |  |             | At least one of the debtors and anoth   | ther                               |  | -  |
|             |  |             | Check if this is community proper instructions)   | rty (see                           |  |  |
| 3.4         | Make   |             | Who has an interest in the property? one.   |                                    | Do not deduct secured the amount of any secu   | •  |
|             | Model:<br>Year:  |             | Debtor 1 only   |                                    | Creditors Who Have Cla   |  |
|             | Approximate mileage:   |             | Debtor 2 only   |                                    |  |  |
|             | Other defendables  |             |   |                                    | Current value of the entire property?  | Current value of the portion you own?  |
|             | Other information:   |             | Debtor 1 and Debtor 2 only  |                                    |  |  |
|             |  |             | At least one of the debtors and anoth   |                                    |  |  |
|             |  |             | Check if this is community proper instructions)   | rty (see                           |  |  |
| Exar        |  | -           | er recreational vehicles, other vehicles,<br>, fishing vessels, snowmobiles, motorcycle   |                                    |  |  |
| Exar        | nples: Boats, trailers, motors, p<br>No  | -           |   | e accessories  Check               | s  Do not deduct secured   |  |
| Exar        | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make   | -           | , fishing vessels, snowmobiles, motorcycle  Who has an interest in the property?  | e accessories  Check               | s  | red claims on <i>Schedul</i>   |
| Exar        | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make<br>Model:   | -           | who has an interest in the property?  | e accessories                      | Do not deduct secured the amount of any secu   | red claims on <i>Schedul</i><br>iims Secured by Proper   |
| Exar        | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make<br>Model:<br>Year:  | -           | who has an interest in the property? one.  Debtor 1 only  | e accessories<br>Check             | Do not deduct secured<br>the amount of any secu<br>Creditors Who Have Cla  | red claims on <i>Schedul</i><br>iims Secured by Proper   |
| Exar        | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:                              | -           | who has an interest in the property? one.  Debtor 1 only Debtor 2 only  | e accessories                      | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedul<br>nims Secured by Proper<br>Current value of the  |
| Exar        | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:                              | -           | who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | e accessories Check                | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedul<br>nims Secured by Proper<br>Current value of the  |
| Exar<br>4.1 | nples: Boats, trailers, motors, p<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:                              | -           | Who has an interest in the property? one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote Check if this is community proper   | e accessories Check ther trty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured  | red claims on Schedul hims Secured by Proper  Current value of the portion you own?  claims or exemptions.   |
| Exar<br>4.1 | nples: Boats, trailers, motors, p  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:        | -           | Who has an interest in the property? one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoti Check if this is community proper instructions)  Who has an interest in the property? one.                                    | e accessories Check ther trty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedulins Secured by Proper Current value of the portion you own?  claims or exemptions.  |
| Exar<br>4.1 | nples: Boats, trailers, motors, p  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year: | -           | who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoti Check if this is community proper instructions) Who has an interest in the property?   | e accessories Check ther trty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured  | red claims on Schedulins Secured by Proper  Current value of the portion you own?  claims or exemptions.   |
| Exar<br>4.1 | nples: Boats, trailers, motors, p  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:        | -           | Who has an interest in the property? one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoti Check if this is community proper instructions)  Who has an interest in the property? one.                                    | c accessories Check ther erty (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | red claims on Schedulinims Secured by Proper  Current value of the portion you own?  claims or exemptions.  red claims on Schedulinims Secured by Proper  Current value of the |
| Exar<br>4.1 | nples: Boats, trailers, motors, p  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year: | -           | Who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anott Check if this is community proper instructions) Who has an interest in the property? one. Debtor 1 only                        | c accessories Check ther erty (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications Classification Creditors Who Have Classification Control | red claims on Schedulinims Secured by Proper  Current value of the portion you own?  claims or exemptions.  claims on Schedulinims Secured by Proper                           |
| Exar<br>4.1 | Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:         | -           | Who has an interest in the property? one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote instructions)  Who has an interest in the property? one. Debtor 1 only Debtor 2 only  | e accessories Check ther rty (see  | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | red claims on Schedulinims Secured by Proper  Current value of the portion you own?  claims or exemptions.  red claims on Schedulinims Secured by Proper  Current value of the |
| Exar<br>4.1 | Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:         | -           | who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote instructions)  Who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only | e accessories Check ther rty (see  | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | red claims on Schedulinims Secured by Proper  Current value of the portion you own?  claims or exemptions.  red claims on Schedulinims Secured by Proper  Current value of the |

#### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 13 of 67

Debtor 1 Shemika Robinson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$775.00 for Part 3. Write that number here .....

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 14 of 67

Robinson Debtor 1 Shemika Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes ..... \$25.00 Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$200.00 17.1. Checking account: Chase 17.2. Checking account: 17.3. Savings account: Chase \$200.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 15 of 67

| Deb. | tor 1 Shemika                                    | Middle None  | Robinson<br>Last Nama          | Case number (if known)                     |     |
|------|--|--|--------------------------------|--|-----|
|      | First Name                                       | Middle Name  | Last Name                      |  |     |
| 20.  |  | orate bonds and other negotia  |                                |  |     |
|      |  | include personal checks, cashiers<br>ents are those you cannot transfe |                                |  |     |
|      |  | ents are those you cannot transfe                                      | i to someone by signing        | or delivering them.                        |     |
|      | <b>✓</b> No                                      |  |                                |  |     |
|      | Yes. Give specific information about             | In a constant of   |                                |  |     |
|      | them   | Issuer name:   |                                |  |     |
|      |  | -  |                                |  | _   |
|      |  |  |                                |  |     |
|      |  |  |                                |  | -   |
|      |  |  |                                |  | -   |
| 21.  | Retirement or pension  Examples: Interests in If |  | ) thrift savings accounts      | , or other pension or profit-sharing plans |     |
|      | ✓ No   | ,,,  | ,, amir carmige accounts,      | , or ourse periods or promedianing plane   |     |
|      | Yes. List each                                   | Type of account:   | Institution name:              |  |     |
|      | account  | 401(k) or similar plan:  |                                |  |     |
|      | separately.                                      |  |                                |  | _   |
|      |  | Pension plan:  | -                              |  | -   |
|      |  | IRA:   |                                |  |     |
|      |  | Retirement account:  |                                |  |     |
|      |  | Keogh:   |                                |  | -   |
|      |  | Additional account:  |                                |  | -   |
|      |  | Additional account:  | -                              |  | -   |
| 22   | Security deposits and                            | prepayments  |                                |  | _   |
|      | Your share of all unused                         | d deposits you have made so that                                       |                                |  |     |
|      | Examples: Agreements of companies, or others     | with landlords, prepaid rent, publi                                    | c utilities (electric, gas, wa | ater), telecommunications                  |     |
|      |  |  | Institution name:              |  |     |
|      | ✓ No   |  | msulution name.                |  |     |
|      | Yes  | Electric:  |                                |  | _   |
|      |  | Gas:   |                                |  | _   |
|      |  | Heating oil:   |                                |  | _   |
|      |  | Security deposit on rental unit:                                       |                                |  | _   |
|      |  | Prepaid rent:  |                                |  |     |
|      |  | Telephone:   |                                |  |     |
|      |  | Water:   |                                |  | _   |
|      |  | Rented furniture:  |                                |  |     |
|      |  | Other:   |                                |  |     |
| 23.  | Annuities (A contract fo                         | or a periodic payment of money to                                      | you, either for life or for    | a number of years)                         |     |
|      | <b>✓</b> No                                      |  |                                |  |     |
|      | Yes  | Issuer name and description:   |                                |  |     |
|      |  |  |                                |  |     |
|      |  |  |                                |  | · · |
|      |  |  |                                |  | -   |
|      |  |  |                                |  |     |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 16 of 67

| Debt | tor 1 Shemika  | Robinson   | Case number (if known)   |   |
|------|--|--|--|---|
| 0.4  |  | E Name Last Name   | u a modified state toities sussus  |   |
| 24.  | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529   | count in a qualified ABLE program, or unde<br>9(b)(1).   | r a qualified state tuition program.   |   |
|      | No Institution name and description Yes  | ription. Separately file the records of any interest   | ts.11 U.S.C. § 521(c):   |   |
|      |  |  |  |   |
| 25.  |  | property (other than anything listed in line   | 1), and rights or powers   |   |
|      | exercisable for your benefit  No   |  |  |   |
|      | Yes. Describe  |  |  |   |
| 26.  |  | e secrets, and other intellectual property<br>tes, proceeds from royalties and licensing agree | ements   |   |
|      | ✓ No  Yes. Describe  |  |  |   |
|      |  |  |  |   |
| 27.  | <b>Licenses, franchises, and other genera</b> <i>Examples:</i> Building permits, exclusive licenters   | al intangibles<br>nses, cooperative association holdings, liquor li                            | censes, professional licenses  |   |
|      | ✓ No  Yes. Describe  |  |  |   |
|      |  |  |  |   |
|      |  |  |  |   |
| Moi  | ney or property owed to you?   |  |  | Current value of the portion you own? Do not deduct secured claims or exemptions.                     |
|      | ney or property owed to you?  Tax refunds owed to you  |  |  | portion you own?  |
|      |  |  |  | portion you own? Do not deduct secured  |
|      | Tax refunds owed to you  | 2016 Anticipated Tax Refund  | Federal:   | portion you own? Do not deduct secured  |
|      | Tax refunds owed to you  ☐ No ☐ Yes. Give specific information   | 2016 Anticipated Tax Refund  | State:   | portion you own? Do not deduct secured claims or exemptions.  \$1440.00 \$0.00                        |
| 28.  | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years   |  | State:<br>Local:   | portion you own? Do not deduct secured claims or exemptions.  \$1440.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds owed to you  No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,   | 2016 Anticipated Tax Refund spousal support, child support, maintenance,                       | State:<br>Local:   | portion you own? Do not deduct secured claims or exemptions.  \$1440.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years   |  | State:<br>Local:   | portion you own? Do not deduct secured claims or exemptions.  \$1440.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  |  | State:  Local:  divorce settlement, property settlemen   | portion you own? Do not deduct secured claims or exemptions.  \$1440.00  \$0.00  \$0.00               |
| 28.  | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  |  | State:  Local:  divorce settlement, property settlemen  Alimony:  Maintenance:  Support:                                       | portion you own? Do not deduct secured claims or exemptions.  \$1440.00  \$0.00  \$0.00  t            |
| 28.  | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  |  | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement:                      | \$1440.00 \$10.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 29.  | Tax refunds owed to you  No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  Yes. Give specific information   |  | State:  Local:  divorce settlement, property settlemen  Alimony:  Maintenance:  Support:                                       | portion you own? Do not deduct secured claims or exemptions.  \$1440.00 \$0.00  \$0.00  \$0.00 \$0.00 |
| 29.  | Tax refunds owed to you  No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insurar |  | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$1440.00 \$10.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 29.  | Tax refunds owed to you  No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony,  No  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insurar | spousal support, child support, maintenance,   | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$1440.00 \$10.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 17 of 67

| Deb <sup>-</sup> | tor 1 Shemika   | Robinson  | Case number (if known)                        |   |
|------------------|---|---|---|---|
|                  | First Name Mi   | iddle Name Last Name  |   |   |
| 31.              | Interests in insurance policies Examples: Health, disability, or life insur   | rance; health savings account (HSA); credit, hor  | neowner's, or renter's insurance              |   |
|                  | Yes. Name the insurance company of each policy and list its value   | Company name:   | Beneficiary:                                  | Surrender or refund value:  |
| 32.              | Any interest in property that is due y If you are the beneficiary of a living trus property because someone has died.  No Yes. Describe | you from someone who has died<br>t, expect proceeds from a life insurance policy,         | or are currently entitled to receive          |   |
| 33.              | Claims against third parties, whether   | er or not you have filed a lawsuit or made a<br>outes, insurance claims, or rights to sue | demand for payment                            |   |
| 34.              | Other contingent and unliquidated of to set off claims  No Yes. Describe  | claims of every nature, including countercla  | nims of the debtor and rights                 |   |
| 35.              | Any financial assets you did not alre   | eady list   |   |   |
| 36.              |   | ntries from Part 4, including any entries for   |   | \$1865.00   |
| Part             | -   | ated Property You Own or Have an Int  | -   | 1.  |
| 37.              | No. Go to Part 6.  Yes. Go to line 38.  | itable interest in any business-related prop  | p<br>D  | current value of the ortion you own? To not deduct secured claims rexemptions |
| 38.              | Accounts receivable or commissions  No Yes. Describe  | s you already earned  |   |   |
| 39.              | Office equipment, furnishings, and s Examples: Business-related computers   | supplies<br>, software, modems, printers, copiers, fax mach                               | nines, rugs, telephones, desks, chairs, elect | ronic devices   |
|                  | Yes. Describe   |   |   |   |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 18 of 67

| Debt | tor 1 Shemika                                      | Robinson                                  | Case number (if known)        |  |
|------|--|---|-------------------------------|--|
| ı    | First Name Middle Nam                              |   |                               |  |
| 40.  | Machinery, fixtures, equipment, supplies yo        | u use in business, and tools of your ti   | rade                          |  |
|      | <b>✓</b> No  |   |                               |  |
|      | Yes. Describe                                      |   |                               |  |
|      |  |   |                               |  |
|      |  |   |                               |  |
| 41.  | Inventory  |   |                               |  |
|      | <b>✓</b> No  |   |                               |  |
|      | Yes. Describe                                      |   |                               |  |
|      |  |   |                               |  |
| 10   |  |   |                               |  |
| 42.  | Interests in partnerships or joint ventures        |   |                               |  |
|      | ✓ No   | Name of entity:                           | % of ownership:               |  |
|      | Yes. Give specific                                 | Name of entity.                           | % of ownership.               |  |
|      | information about them                             |   |                               |  |
|      | uieiii   |   |                               |  |
|      |  |   |                               |  |
| 40.4 | •            |   |                               | _  |
| 43.  | Customer lists, mailing lists, or other compile    | ations                                    |                               |  |
|      | <b>✓</b> No  |   |                               |  |
|      | Yes. Do your lists include personally identif      | iable information (as defined in 11 U.S.C | C. § 101(41A))?               |  |
|      | ☐ No   |   |                               |  |
|      | Yes. Describe                                      |   |                               |  |
|      | Tes. Describe                                      |   |                               |  |
| 44.  | Any business-related property you did not a        | Iready list                               |                               |  |
|      | <b>☑</b> No  |   |                               |  |
|      |  |   |                               | <u> </u>                                   |
|      | Yes. Give specific information                     |   |                               |  |
|      |  |   |                               | <u> </u>                                   |
|      |  | -   |                               | <del></del>                                |
|      |  |   |                               |  |
|      |  |   |                               |  |
|      |  |   |                               |  |
|      |  |   |                               |  |
|      |  |   |                               |  |
|      | dd the dollar value of all of your entries from    |   |                               |  |
| N    | art 5. Write that number here                      |   |                               |  |
| Part | 6: Describe Any Farm- and Commerc                  | cial Fishing-Related Property Yo          | u Own or Have an Interest In. |  |
|      | If you own or have an interest in farmland, list i | t in Part 1.                              |                               |  |
| 46.  | Do you own or have any legal or equitable i        | nterest in any farm- or commercial fi     | shing-related property?       |  |
|      | No. Go to Part 7.                                  |   |                               | Current value of the                       |
|      | Yes. Go to line 47.                                |   |                               | portion you own?                           |
|      | Tes. do to line 47.                                |   |                               | Do not deduct secured claims or exemptions |
| 47.  | Farm animals                                       |   |                               |  |
|      | Examples: Livestock, poultry, farm-raised fish     |   |                               |  |
|      | ✓ No   |   |                               |  |
|      | Yes. Describe                                      |   |                               |  |
|      |  |   |                               |  |
|      |  |   |                               |  |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 19 of 67

| Debto          | r 1 Shemika<br>First Name |  | Robinson<br>Last Name  | Case number (if known)       |              |
|----------------|---------------------------|--|------------------------|------------------------------|--------------|
| 48. <b>(</b>   | Crops-either growing o    |  | Last Name              |                              |              |
| TO. 1          |                           | naivesteu  |                        |                              |              |
| Ļ              | ✓ No Yes. Describe        |  |                        |                              |              |
| L              | Too. Boombo               |  |                        |                              |              |
|                |                           |  |                        |                              |              |
| 49. <b>F</b>   | arm and fishing equip     | ment, implements, machinery, fixtur                              | es, and tools of trade |                              |              |
| [              | <b>√</b> No               |  |                        |                              |              |
|                | Yes. Describe             |  |                        |                              |              |
|                |                           |  |                        |                              |              |
| 50. <b>F</b>   | arm and fishing suppl     | ies, chemicals, and feed   |                        |                              |              |
| ſ              | <b>√</b> No               |  |                        |                              |              |
| Ī              | Yes. Describe             |  |                        |                              |              |
|                |                           |  |                        |                              |              |
| 51. A          | Any farm- and commer      | cial fishing-related property you did                            | not already list       |                              |              |
| Г              | <b>√</b> No               |  |                        |                              |              |
| İ              | Yes. Describe             |  |                        |                              |              |
| •              | _                         |  |                        |                              |              |
|                | -                         |  |                        | Г                            |              |
|                |                           | l of your entries from Part 6, includin                          |                        |                              |              |
| <b>&gt;</b>    |                           |  |                        |                              |              |
|                |                           |  |                        |                              |              |
|                |                           |  | = =                    |                              |              |
| Part 7:        |                           | perty You Own or Have an Inter                                   |                        | ot List Above                |              |
|                |                           | perty of any kind you did not already s, country club membership | list?                  |                              |              |
|                | ✓ No                      |  |                        |                              | 1            |
|                | Yes. Give specific        |  |                        |                              |              |
| _              | information               |  |                        |                              |              |
|                |                           |  |                        |                              |              |
|                |                           |  |                        |                              |              |
| 54. Add        | the dollar value of all   | of your entries from Part 7. Write th                            | at number here         |                              | <b>P</b>     |
|                |                           |  |                        |                              |              |
|                |                           |  |                        |                              |              |
|                |                           |  |                        |                              |              |
| Doub O.        | List the Totals of        | Each Part of this Form   |                        |                              |              |
| Part 8:        | List the Totals of        | Laciffactorulistoriii  |                        |                              |              |
| 55. <b>P</b> a | rt 1: Total real estate   | , line 2   |                        | <b>&gt;</b>                  | \$50000.00   |
| 50             | 101.1.1                   | -  |                        |                              |              |
| -              | rt 2 total vehicles, line |  | \$7400.00              |                              |              |
| 57. <b>Pa</b>  | rt 3: Total personal an   | d household items, line 15                                       | \$775.00               |                              |              |
| 58. <b>Pa</b>  | rt 4: Total financial as  | sets, line 36  | \$1865.00              |                              |              |
| 59. <b>P</b> a | rt 5: Total business-re   | elated property, line 45   |                        |                              |              |
| 60. <b>P</b> a | rt 6: Total farm- and f   | ishing-related property, line 52                                 |                        |                              |              |
| 61. <b>P</b> a | rt 7: Total other prope   | erty not listed, line 54   |                        |                              |              |
|                |                           | Add lines 56 through 61.   |                        |                              | <b>A</b>     |
|                | - Farana brokeniji        |  | \$10040.00             | Copy personal property total | + \$10040.00 |
|                |                           |  |                        |                              | \$60040.00   |
| 63 Tot         | al of all property on S   | chedule A/B. Add line 55 + line 62                               |                        |                              | \$60040.00   |

#### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 20 of 67

| Fill in this information to identify your case: |            |             |                      |  |  |
|---|------------|-------------|----------------------|--|--|
| Debtor 1  | Shemika    |             | Robinson             |  |  |
|   | First Name | Middle Name | Last Name            |  |  |
| Debtor 2  |            |             |                      |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name            |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois |  |  |
| Case number (If known)                          |            |             | (State)              |  |  |

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Part 1: Identify the Property You Claim as Exempt                                   |   |   |                                    |  |  |  |  |
|----|---|---|---|------------------------------------|--|--|--|--|
| 1. | Which set of exemptions are you claim   | ing? Check one only, ev   | ven if your spouse is filing with you.  |                                    |  |  |  |  |
|    | You are claiming state and federal  | nonbankruptcy exemp   | otions. 11 U.S.C. § 522(b)(3)   |                                    |  |  |  |  |
|    | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                          |   |   |                                    |  |  |  |  |
| 2. | For any property you list on Schedule A   | /B that you claim as e  | exempt, fill in the information below.  |                                    |  |  |  |  |
|    | Brief description of the property and line on Schedule A/B that lists this property | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption |  |  |  |  |
|    | Brief description:  Misc. Household Goods and Furniture  Line from Schedule A/B: 06 | \$350.00  | \$350.00  100% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(b)              |  |  |  |  |
|    | Brief description:  Misc. Electronics  Line from Schedule A/B: 07                   | \$200.00  | \$200.00  100% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| 3. | ✓ No  | ery 3 years after that for  | 375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case? |                                    |  |  |  |  |

#### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 21 of 67

Debtor 1 Shemika Robinson Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$225.00 description: **✓** \$225.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$25.00 description: **✓** \$25.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$200.00 description: **✓** \$200.00 Chase 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$200.00 description: \$200.00 Chase 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17 Brief 735 ILCS 5/12-1001(c); 735 ILCS \$7,400.00 5/12-1001(b) description: **✓** \$0 Dodge Avenger, 2014, 100% of fair market value, up to any 2014 Dodge Avenger: REAFFIRM applicable statutory limit

\$1,440.00

100% of fair market value, up to any

applicable statutory limit

Line from Schedule A/B:

description:

Line from Schedule A/B:

Refund

Brief

03

2016 Anticipated Tax

\$1,440.00

735 ILCS 5/12-1001(b)

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 22 of 67

| Fill in       | this information to identify your ca                    | se:   |  |  |                                  |
|---------------|---|---|--|--|----------------------------------|
| Debto         | or 1 Shemika  | Robinson  |  |  |                                  |
| Debio         | First Name  | Middle Name Last Name   |  |  |                                  |
| Debto         | or 2  |   |  |  |                                  |
| (Spous        | e, if filing) First Name                                | Middle Name Last Name   |  |  |                                  |
| United        | d States Bankruptcy Court for the:                      | Northern District of Illinois (State)   |  |  |                                  |
| Case (If know | number<br>  | (State)   |  |  |                                  |
| Offi          | icial Form 106D   |   | I  |  | Check if this is a mended filing |
| Sch           | nedule D: Credito                                       | ors Who Have Claims Secure  | ed by Prop   | ertv   | 12/1                             |
| Be as more s  | complete and accurate as possib                         | le. If two married people are filing together, both are equal and Page, fill it out, number the entries, and attach it to t   | ally responsible for s                                 | upplying correct info                        |                                  |
| 1. [          | Do any creditors have claims se                         | ecured by your property?  |  |  |                                  |
|               | No. Check this box and subm                             | it this form to the court with your other schedules. You hav  | e nothing else to rep                                  | ort on this form.                            |                                  |
|               | Yes. Fill in all of the information                     | below.  |  |  |                                  |
| Part '        | 1: List All Secured Claims                              |   |  |  |                                  |
| 2.            | List all secured claims. If a credit                    | or has more than one secured claim, list the creditor   | Column A   | Column B                                     | Column C                         |
|               |   | an one creditor has a particular claim, list the other creditors the claims in alphabetical order according to the creditor's | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any         |
| 2.1           | Roundpoint Mortgage                                     | Describe the property that secures the claim:   | \$110,577.00   | \$100,000.00                                 | <u>\$10,577.0</u> 0              |
|               | Creditor's Name  5032 parkway plaza blvd  Number Street | 7743 S Sawyer Ave, Chicago, IL 60652: SURRENDER INTEREST  |  |  |                                  |
|               | Number Street   | As of the date you file, the claim is: Check all that apply.  |  |  |                                  |
|               | North   | Contingent  |  |  |                                  |
|               | CHARLOTTEarolina 28217                                  | Unliquidated  |  |  |                                  |
|               | City State ZIP Code                                     | Disputed  |  |  |                                  |
|               | Who owes the debt? Check one.  Debtor 1 only            | Nature of lien. Check all that apply.   |  |  |                                  |
|               | Debtor 2 only   | An agreement you made (such as mortgage or secured car loan)  |  |  |                                  |
|               | Debtor 1 and Debtor 2 only                              | Statutory lien (such as tax lien, mechanic's lien)  |  |  |                                  |
|               | At least one of the debtors and another                 | Judgment lien from a lawsuit  |  |  |                                  |
|               | Check if this claim relates                             | Other (including a right to offset)   |  |  |                                  |
|               | to a community debt  Date debt was 2/1/2009             | Last 4 digits of account number6544   |  |  |                                  |
| 0.0           | incurred CAPITAL ONE AUTO FINAN                         | -   | ¢19.440.00   | \$7,400,00                                   | ¢11 040 00                       |
| 2.2           | Creditor's Name   | Describe the property that secures the claim:   | \$18,440.00  | \$7,400.00                                   | <u>\$11,040.0</u> 0              |
|               | 3901 DALLAS PKWY  Number Street                         | 2014 Dodge Avenger: REAFFIRM  As of the date you file, the claim is: Check all that apply.                                    |  |  |                                  |
|               |   | Contingent  |  |  |                                  |
|               | PLANO Texas 75093                                       | Unliquidated  |  |  |                                  |
|               | City State ZIP Code                                     | Disputed  |  |  |                                  |
|               | Who owes the debt? Check one.  Debtor 1 only            | Nature of lien. Check all that apply.   |  |  |                                  |
|               | Debtor 2 only   | An agreement you made (such as mortgage or secured  |  |  |                                  |
|               | Debtor 1 and Debtor 2 only                              | car loan)   |  |  |                                  |
|               | At least one of the debtors                             | Statutory lien (such as tax lien, mechanic's lien)  |  |  |                                  |
|               | and another  Check if this claim relates                | Judgment lien from a lawsuit  |  |  |                                  |
|               | to a community debt  Date debt was 3/1/2014             | Other (including a right to offset)  Last 4 digits of account number1001  |  |  |                                  |
|               | incurred  | -   | L #400 017 00  |  |                                  |
|               | Add the dollar value of y                               | our entries in Column A on this page. Write that number   | \$129,017.00   |  |                                  |

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 23 of 67

| Fill i                         | n this inforr  | mation to identify your c | ase:                           |                      |             |  |
|--------------------------------|--|---------------------------|--------------------------------|----------------------|-------------|--|
| Deb                            | tor 1  | Shemika                   |                                | Robinson             |             |  |
|                                |  | First Name                | Middle Name                    | Last Name            |             |  |
| Deb                            | tor 2  |                           |                                |                      |             |  |
| (Spo                           | use, if filing)  | First Name                | Middle Name                    | Last Name            |             |  |
| Unit                           | ed States B  | ankruptcy Court for the:  | Northern                       | District of Illinois |             |  |
| 0                              |  |                           |                                | (State)              |             |  |
| (If knd                        | e number<br>own)   |                           |                                |                      |             |  |
| Off                            | icial Fo   | orm 106E/F                |                                |                      |             | Check if this is an amended filing   |
|                                |  |                           |                                |                      |             | _  |
| Sc                             | hedu   | ile E/F: Cre              | ditors Who                     | <b>Have Unsec</b>    | ured Claims | 12/15  |
| othe<br>Form<br>clain<br>the e | Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). |                           |                                |                      |             |  |
| Par                            | List A   | All of Your PRIORITY      | / Unsecured Claims             |                      |             |  |
| 1.                             | Do any cr  | editors have priority un  | secured claims against y       | /ou?                 |             |  |
|                                | No. G  | 3o to Part 2.             |                                |                      |             |  |
|                                | Yes.   |                           |                                |                      |             |  |
| 2.                             | listed, iden   |                           | is. If a claim has both priori |                      |             | arately for each claim. For each claim oth priority and nonpriority amounts. |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

**Priority** 

amount

Nonpriority

amount

#### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 24 of 67

Debtor 1 Shemika Robinson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 AMERICAN CREDIT ACCEPT \$13,447.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1/2014 961 E MAIN ST Number Street As of the date you file, the claim is: Check all that apply. Contingent **SPARTANBURG** 29302 South Carolina Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ 036 Automobile **✓** No Yes CAPITAL ONE BANK (USA), N.A. \$1,047.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 71083 When was the debt incurred? 2/1/2012 Number Street As of the date you file, the claim is: Check all that apply. c/o Ashley Boswell Contingent North Carolina 28272 Charlotte Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ CreditCard **✓** No Yes COMENITY BANK/NWYRK&CO \$271.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 3/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WESTERVILLE Ohio 43081 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ CreditCard  $\overline{\mathbf{A}}$ No Yes

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 25 of 67

Debtor 1 Shemika Robinson Case number (if known) Last Name

| Part 2: | Your NONPRIORITY Unsecured Claims - Continuati   | ion Page  |             |
|---------|--|---|-------------|
| ,       | After listing any entries on this page, number them beginning  | with 4.5, followed by 4.6, and so forth.  | Total claim |
| 1       | ENHANCED RECOVERY CO Nonpriority Creditor's Name 8014 Bayberry Road Number Street  | Last 4 digits of account number 2595  When was the debt incurred? 7/1/2016  As of the date you file, the claim is: Check all that apply.  | \$450.00    |
|         | Jacksonville Florida 32256 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify ORIGINAL CREDITOR: AT T  |             |
|         | No priority Creditor's Name Po Box 530210 Number Street Department of Education  Atlanta Georgia 30353 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes | When was the debt incurred? 3/1/2013  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify  | \$48,392.00 |
|         | HWARFIELD Nonpriority Creditor's Name 4620 WOODLAND CORP Number Street  TAMPA Florida 33614 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No                  | Last 4 digits of account number 8649  When was the debt incurred? 8/1/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: 09 Other. Specify SOMERSET PARK APARTMENTS | \$1,213.00  |

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 26 of 67

| After listing any entries on this page, number them beginn  | ning with 4.5, followed by 4.6, and so forth.   | Total claim |
|---|---|-------------|
| MCCARTHY BURGESS & WOL Nonpriority Creditor's Name 26000 Cannon Rd Number Street  | Last 4 digits of account number 0000  When was the debt incurred? 5/1/2016  As of the date you file, the claim is: Check all that apply.  | \$340.00    |
| Bedford Ohio 44146 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  No  Yes                     | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  O01 Collection; Collecting for ORIGINAL CREDITOR: COMMONWEALTH EDISON Other. Specify COMPANY AK |             |
| PORTFOLIO RECOVERY ASS Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 Number Street   | When was the debt incurred? 8/1/2011  As of the date you file, the claim is: Check all that apply.  | \$598.00    |
| NORFOLK Virginia 23502 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  ☐ Yes | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 001 UnknownLoanType  |             |
| Sprint Nonpriority Creditor's Name P.O. Box 219554 Number Street  | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  | \$1,300.00  |
| Kansas City Missouri 64121 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No     | Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Phone Bills  |             |

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 27 of 67

Debtor 1 Shemika Robinson \_\_ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SYNCB/GAP \$898.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 29116 When was the debt incurred? 10/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent SHAWNEE MISSIO 66201 Kansas Unliquidated Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 28 of 67

Debtor 1 Shemika Robinson Case number (if known)

| FIRST Na                 | me Middle Name Last Name  |         |                      |       |
|--------------------------|---|---------|----------------------|-------|
| Part 4: Add t            | he Amounts for Each Type of Unsecured Claim   |         |                      |       |
|                          | amounts of certain types of unsecured claims. This information is mounts for each type of unsecured claim.  | s for s | tatistical reporting | purpo |
|                          |   |         | Total claims         |       |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.     | \$0.00               |       |
|                          | 6b. Taxes and certain other debts you owe the government  |         | \$0.00               |       |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.     | \$0.00               |       |
|                          | 6d. Other. Add all other priority unsecured claims. Write that  | 6d.     | \$0.00               |       |
|                          | amount here.  | 0       | \$0.00               |       |
|                          | 6e. Total. Add lines 6a through 6d.   | 6e.     |                      |       |
|                          |   |         | Total claims         |       |
| Total claims from Part 2 | 6f. Student loans   | 6f.     | \$48,392.00          |       |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.     | \$0.00               |       |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.     | \$0.00               |       |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i.     | \$19,564.00          |       |
|                          | 6i Total Add lines 6f through 6i  | 6i      | \$67,956.00          |       |

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 29 of 67

| Fill in this information to identify your case: |                          |             |                      |  |
|---|--------------------------|-------------|----------------------|--|
| Debtor 1  | Shemika                  |             | Robinson             |  |
|   | First Name               | Middle Name | Last Name            |  |
| Debtor 2  |                          |             |                      |  |
| (Spouse, if filing)                             | First Name               | Middle Name | Last Name            |  |
| United States B                                 | ankruptcy Court for the: | Northern    | District of Illinois |  |
|   |                          |             | (State)              |  |
| Case number                                     |                          |             |                      |  |
| (If known)                                      |                          |             |                      |  |

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main

|                    | Odoc 10 000   | Do   | ocument Page   | 30 of 67   |
|--------------------|---|--|--|--|
| Fill in th         | is information to identify your   | case:  |  |  |
| Debtor             |   |  | Robinson   |  |
| Debtoi             | First Name  | Middle Name  | Last Name  |  |
| Debtor             |   |  |  |  |
| (Spouse, i         | if filing) First Name   | Middle Name  | Last Name  |  |
| United S           | States Bankruptcy Court for the   | : Northern   | District of Illinois   |  |
| Case nu            | umber   |  | (State)  |  |
| Offic              | cial Form 106H  |  |  | Check if this is an amended filing   |
| Sche               | edule H: Your Co  | debtors  |  | 12/15  |
| 1. [<br>[.<br>2. V | Answer every question.  Oo you have any codebtors? (  No Yes  Within the last 8 years, have your california, Idaho, Louisiana, New No. Go to line 3.  Yes. Did your spouse, for | If you are filing a joint case,  you lived in a community production of the community of th | do not list either spouse as property state or territory co, Texas, Washington, an walent live with you at the | ? (Community property states and territories include Arizona, d Wisconsin.)  |
|                    | Name of your spouse,  | former spouse, or legal equ  | ivalent  | <u> </u>   |
|                    | City  | Ctoto  | Zin Cod  |  |
| a<br>S             | gain as a codebtor only if the  | at person is a guarantor o   | r cosigner. Make sure yo   | if your spouse is filing with you. List the person shown in line 2 u have listed the creditor on Schedule D (Official Form 106D), hedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 2: The creditor to whom you owe the debt |
|                    | Joinnin 1. Tour codebior  |  |  | Check all schedules that apply:  |
| 3.1 k              | (allo Olavia  |  |  | Chiest all confedence that apply.  |
| <u> </u>           | Kelly, Gloria   |  |  | Schedule D, line 2.1   |

Official Form 106H Schedule H: Your Codebtors page 1

Zip Code

Schedule E/F, line\_\_\_\_\_

Schedule G, line

Name

Number

City

Street

State

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 31 of 67

| Fill in this in                | formation to identify                              | your case:   |                    |                |       |            |  |                    |
|--------------------------------|--|--|--------------------|----------------|-------|------------|--|--------------------|
| Debtor 1                       | Shemika  |  | Robins             | son            |       |            |  |                    |
|                                | First Name   | Middle Name  | Last N             | ame            |       | Che        | ck if this is:   |                    |
| Debtor 2<br>(Spouse, if filing | First Name   | Middle Name  | Last N             | ame            |       | _  ,       | An amended filing  |                    |
|                                |  |  |                    |                |       |            | A supplement showing post-pe                             | etition chapter 13 |
| United States the:             | Bankruptcy Court for                               | Northern   | _ District of Illi | nois<br>State) |       |            | expenses as of the following da                          |                    |
| Case number                    | r  |  | (0                 | , idio,        |       | _   -      |  |                    |
| (If known)                     |  |  |                    |                |       |            | MM / DD / YYYY   |                    |
| Official                       | Form 106I  |  |                    |                |       |            |  |                    |
| Schedu                         | le I: Your In                                      | come   |                    |                |       |            |  | 12/1               |
| spouse. If m<br>number (if k   |  | l, attach a separate she<br>y question.                    | •                  |                | _     | •          | not include information ab<br>onal pages, write your nar | •                  |
| •                              | ur employment                                      |  | Debtor 1           |                |       |            | Debtor 2   |                    |
| informati                      | on.  | Employment status  | <b>✓</b> Emplo     | wed            |       |            | Employed   |                    |
|                                | ve more than one job,<br>eparate page with         |  |                    | nployed        |       |            | Not Employed   |                    |
| informatio                     | n about additional                                 |  |                    |                |       |            |  |                    |
| employers                      |  | Occupation   | PSE Clerk          |                |       |            | <u> </u>   |                    |
|                                | art time, seasonal, or<br>oyed work.               | Employer's name  | USPS               |                |       |            |  |                    |
|                                | on may include student                             | Employer's address   |                    | 920 Curtiss St |       |            |  |                    |
|                                | naker, if it applies.                              |  | Number Str         | reet           |       |            | Number Street  |                    |
|                                |  |  |                    |                |       |            |  |                    |
|                                |  |  | Downers            | Illin          | iois  | 60515      |  |                    |
|                                |  |  | Grove<br>City      | Sta            | ite   | Zip Code   | _ City State   | Zip Code           |
|                                |  | How long employed  | 1 year 4 m         | onths          |       | •          |  |                    |
|                                |  | there?   | <u>- 7</u>         |                |       |            |  |                    |
| Part 2: Gi                     | ve Details About N                                 | Nonthly Income   |                    |                |       |            |  |                    |
| spouse unle                    | ss you are separated.<br>Ir non-filing spouse have | e more than one employer,                                  | -                  | _              |       |            | vrite \$0 in the space. Include y                        | _                  |
| more space                     | , attach a separate she                            | et to this form.   |                    |                | For D | ebtor 1    | For Debtor 2 or non-filing spouse                        |                    |
|                                |  | ary, and commissions (befo<br>, calculate what the monthly |                    | 2.             |       | \$2,840.28 | non-ming apouse  |                    |
| 3. Estima                      | te and list monthly over                           | rtime pay.   |                    | 3.             |       | + \$0.00   |  |                    |
| 4. Calcula                     | ate gross income. Add li                           | ine 2 + line 3.  |                    | 4.             |       | \$2,840.28 |  |                    |
|                                |  |  |                    |                |       |            |  |                    |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 32 of 67

| Debtor 1Shemika   | Robinson                | Case number              | (if                               |                         |
|---|-------------------------|--------------------------|-----------------------------------|-------------------------|
| First Name Middle Name  | Last Name               | known) For Debtor 1      | For Debtor 2 or non-filing spouse |                         |
| Copy line 4 here  | <b>→</b> 4.             | \$2,840.28               | non-ining spouse                  |                         |
| 5. List all payroll deductions:   |                         |                          |                                   |                         |
| 5a. Tax, Medicare, and Social Security deductions   | 5a.                     | \$581.75                 |                                   |                         |
| 5b. Mandatory contributions for retirement plans  | 5b.                     | \$0.00                   |                                   |                         |
| 5c. Voluntary contributions for retirement plans  | 5c.                     | \$0.00                   |                                   |                         |
| 5d. Required repayments of retirement fund loans  | 5d.                     | \$0.00                   |                                   |                         |
| 5e. Insurance   | 5e.                     | \$75.83                  |                                   |                         |
| 5f. Domestic support obligations  | 5f.                     | \$0.00                   |                                   |                         |
| 5g. Union dues  | 5g.                     | \$31.61                  |                                   |                         |
| 5h. Other deductions. Specify:  |                         | \$0.00 +                 |                                   |                         |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5h.  | <del>_</del>            | \$689.20                 |                                   |                         |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin  | e 4. 7.                 | \$2,151.09               |                                   |                         |
| 8. List all other income regularly received:  |                         |                          |                                   |                         |
| 8a. Net income from rental property and from operating a business, profession, or farm  |                         |                          |                                   |                         |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, an the total monthly net income.  | d<br>8a.                | \$0.00                   |                                   |                         |
| 8b. Interest and dividends  | 8b.                     | \$0.00                   |                                   |                         |
| 8c. Family support payments that you, a non-filing spouse, or dependent regularly receive   | r a                     |                          |                                   |                         |
| Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement.   | e,<br>8c.               | \$0.00                   |                                   |                         |
| 8d. Unemployment compensation   | 8d.                     | \$0.00                   |                                   |                         |
| 8e. Social Security   | 8e.                     | \$0.00                   |                                   |                         |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: |                         | \$0.00                   |                                   |                         |
| 8g. Pension or retirement income  | 8f.                     | \$0.00                   |                                   |                         |
|   | 8g.<br>8h. +            | \$0.00 +                 |                                   |                         |
| 8h. Other monthly income. Specify:  |                         |                          |                                   |                         |
| 9. <b>Add all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g  | + 8h. 9.                | \$0.00                   |                                   |                         |
| 10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s  | 10.<br>spouse           | \$2,151.09 +             | =                                 | \$2,151.09              |
| 11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or and   | r household, your o     | lependents, your roomm   | ,                                 |                         |
| Specify:  | שיים מושני מוט ווטני מי | anable to pay expenses i | 11                                | + \$0.00                |
|   |                         |                          |                                   | Ψ0.00                   |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical Science 1981.  |                         |                          | ,                                 | \$2,151.09              |
|   |                         |                          |                                   | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after No.   | you file this form      | •                        |                                   |                         |
| <u> </u>  |                         |                          |                                   |                         |
| Yes. Explain:   |                         |                          |                                   |                         |
|   |                         |                          |                                   | I 1                     |

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 33 of 67

|                                    |  | Docu  | ment Page 33 of 67   |                                     |   |
|------------------------------------|--|---|--|-------------------------------------|---|
| Fill in this infor                 | mation to identify your o                    | case:   |  |                                     |   |
| Debtor 1                           | Shemika<br>First Name                        | Middle Name   | Robinson<br>Last Name  |                                     |   |
| Debtor 2<br>(Spouse, if filing)    | First Name                                   | Middle Name   | Last Name  | Check if this is:  An amended filir | ng  |
| United States E                    | Bankruptcy Court for the:                    | Northern [  | District of Illinois (State)   |                                     | nowing post-petition chapter 13 the following date: |
| Case number<br>(If known)          |  |   | (Otate)  | MM / DD / YYYY                      | <u>,                                      </u>      |
| Official                           | Form 106J                                    |   |  |                                     |   |
| Schedul                            | e J: Your Exp                                | enses   |  |                                     | 12/15   |
| information. If                    | -  |   | re filing together, both are equally form. On the top of any additiona |                                     |   |
|                                    | cribe Your Househo                           | ld  |  |                                     |   |
| 1. Is this a joi                   | nt case?                                     |   |  |                                     |   |
| No. Go                             | to line 2                                    |   |  |                                     |   |
|                                    | oes Debtor 2 live in a s                     | anarate household?                                      |  |                                     |   |
|                                    | _  | parate nousenora.                                       |  |                                     |   |
|                                    | No Yes. Debtor 2 must fil                    | e Official Forms 106J-2, <i>Expe</i> ri                 | nses for Separate Household of Debt                                    | or 2.                               |   |
| 2. Do you hav                      | e dependents?                                | 0   |  |                                     |   |
| Do not list D<br>Debtor 2.         |  | es. Fill out this information for ach dependent         | Dependent's relationship to<br>Debtor 1 or Debtor 2                    | Dependent's age                     | Does dependent live with you?                       |
| expenses o                         | penses include<br>f people other             | 0   |  |                                     |   |
| than<br>yourself and<br>dependents |  | 98  |  |                                     |   |
| Part 2: Estin                      | mate Your Ongoing                            | Monthly Expenses  |  |                                     |   |
| _                                  | of a date after the bank                     |   | rou are using this form as a supploplemental Schedule J, check the     | •                                   | -   |
|                                    | -  | ash government assistance it on Schedule I: Your Income | -  |                                     | Your expenses                                       |
|                                    | or home ownership exor the ground or lot. 4. | penses for your residence. In                           | clude first mortgage payments and                                      |                                     | <b>\$530.00</b>                                     |
| If not incl                        | uded in line 4:                              |   |  |                                     |   |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

## Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 34 of 67

| First Name Middle Name Last Name   |            |               |
|--|------------|---------------|
|  |            | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans  | 5.         | \$0.00        |
| 6. Utilities:  |            |               |
| 6a. Electricity, heat, natural gas   | 6a.        | \$200.00      |
| 6b. Water, sewer, garbage collection   | 6b.        | \$15.00       |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.        | \$150.00      |
| 6d. Other. Specify:  | 6d         | \$0.00        |
| 7. Food and housekeeping supplies  | 7.         | \$300.00      |
| 8. Childcare and children's education costs  | 8.         | \$0.00        |
| 9. Clothing, laundry, and dry cleaning   | 9.         | \$100.00      |
| 10. Personal care products and services  | 10.        | \$50.00       |
| 11. Medical and dental expenses  | 11.        | \$35.00       |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments                   | 12.        | \$250.00      |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.        | \$0.00        |
| 14. Charitable contributions and religious donations   | 14.        | \$0.00        |
| <ul><li>15. Insurance.</li><li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li></ul> |            |               |
| 15a. Life insurance  | 15a        | \$0.00        |
| 15b. Health insurance  | 15b        | \$0.00        |
| 15c. Vehicle insurance   | 15c        | \$75.00       |
| 15d. Other insurance. Specify:   | 15d        | \$0.00        |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.                            |            |               |
| Specify:   | 16         | \$0.00        |
| 17. Installment or lease payments:   |            |               |
| 17a. Car payments for Vehicle 1  | 17a        | \$440.00      |
| 17b. Car payments for Vehicle 2  | 17b        | \$0.00        |
| 17c. Other. Specify:   | 17c        | \$0.00        |
| 17d. Other. Specify:   | 17d        | \$0.00        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from                        |            | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18.        |               |
| 19.Other payments you make to support others who do not live with you.  Specify:                                       | 10         | <b>#0.00</b>  |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.               | 19.        | \$0.00        |
| 20a. Mortgages on other property   | 20a        | \$0.00        |
| 20b. Real estate taxes.  | 20a<br>20b | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  | 20c        | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   | 20d        | \$0.00        |
| 20e. Homeowner's association or condominium dues   | 20e        | \$0.00        |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 35 of 67

| Debtor 1        | Shemika                  |  | Robinson                     | Case number (if known) |     |            |
|-----------------|--------------------------|--|------------------------------|------------------------|-----|------------|
|                 | First Name               | Middle Name  | Last Name                    |                        |     |            |
| 21. <b>Othe</b> | r. Specify:              |  |                              |                        | 21  | \$0.00     |
| 22. <b>Calc</b> | ulate your monthly ex    | penses.  |                              |                        |     | \$2,145.00 |
| 22a.            | Add lines 4 through 21.  |  |                              |                        |     | \$0.00     |
| 22b.            | Copy line 22 (monthly e  | expenses for Debtor 2), if any,                                  | from Official Form 106J-2    |                        |     | \$2,145.00 |
| 22c.            | Add line 22a and 22b. T  | he result is your monthly exp                                    | enses.                       |                        | 22. |            |
| 23.Calcı        | ulate your monthly net   | income.  |                              |                        |     |            |
| 23a.            | Copy line 12 (your comb  | pined monthly income) from                                       | Schedule I.                  |                        | 23a | \$2,151.09 |
| 23b.            | Copy your monthly exp    | enses from line 22 above.  |                              |                        | 23b | \$2,145.00 |
|                 |                          | xpenses from your monthly i                                      | ncome.                       |                        |     | \$6.09     |
|                 | The result is your month | nly net income.  |                              |                        | 23c |            |
| mor             |                          | to finish paying for your car l<br>se or decrease because of a r |                              |                        |     |            |
|                 | Debtor lives w           | ith grandmother and contribu                                     | utes to mortgage and utility | bills                  |     |            |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 36 of 67

| Fill in this infor                      | mation to identify your c | ase:        |                      |  |
|---|---------------------------|-------------|----------------------|--|
| Debtor 1                                | Shemika                   |             | Robinson             |  |
|   | First Name                | Middle Name | Last Name            |  |
| Debtor 2                                |                           |             |                      |  |
| (Spouse, if filing)                     | First Name                | Middle Name | Last Name            |  |
| United States Bankruptcy Court for the: |                           | Northern    | District of Illinois |  |
|   |                           |             | (State)              |  |
| Case number (If known)                  |                           |             |                      |  |

### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to    | help you fill out bankruptcy forms?   |
|     | <b>✓</b> No  |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and   |
|     | that they are true and correct.                                  |   |
| ×   | /s/ Shemika Robinson   | *   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 12/1/2016   | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 37 of 67

| Fill in this infor     | mation to identify your o | case:       |                              |  |
|------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1               | Shemika                   |             | Robinson                     |  |
|                        | First Name                | Middle Name | Last Name                    | Check if this is:  |
| Debtor 2               |                           |             |                              | A constant CP on   |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name                    | An amended filing  |
| United States B        | Sankruptcy Court for the: | Northern    | District of Illinois (State) | A supplement showing post-petition chapter 13 expenses as of the following date: |
| Case number (If known) |                           |             |                              |  |

#### Official Form 106J-2

#### Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:  | Describe Your Household                    |
|----------|--|
| 1.Do you | and Debtor 1 maintain separate households? |
| □ N      | o. Do not complete this form.              |
| ☐ Y      | es.  |

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 38 of 67

| Fill in this info   | ormation to identify your o                                       | case:                  |                           |                |                 |                  |                      |
|---------------------|---|------------------------|---------------------------|----------------|-----------------|------------------|----------------------|
| Debtor 1            | Shemika   |                        | Robinson                  |                |                 |                  |                      |
| Debtor 2            | First Name  | Middle Na              | me Last Nam               | е              |                 |                  |                      |
| (Spouse, if filing) | First Name  | Middle Na              | me Last Nam               | е              |                 |                  |                      |
| United States       | Bankruptcy Court for the:   | Northern               | District of Illino        |                |                 |                  |                      |
| Case number         | ·   |                        | (Stat                     | e)             |                 |                  |                      |
| (If known)          |   |                        |                           |                |                 |                  | Check if this is a   |
| Official            | Form 107  |                        |                           |                |                 |                  | amended filing       |
| Stateme             | ent of Financia   | al Affairs fo          | r Individuals             | Filina fo      | r Bankru        | ptcv             | 12/1                 |
| Be as comp          | ete and accurate as po  | ssible. If two mar     | ried people are filing    | together, bot  | h are equally r | esponsible for   |                      |
|                     | If more space is neede<br>nown). Answer every q                   |                        | ate sneet to this form    | . On the top ( | ot any addition | nai pages, write | your name and case   |
| Part 1: Giv         | e Details About Your  | Marital Status a       | nd Where You Lived        | Before         |                 |                  |                      |
|                     | s your current marital st   |                        |                           |                |                 |                  |                      |
|                     |   | atus:                  |                           |                |                 |                  |                      |
|                     | arried<br>ot married  |                        |                           |                |                 |                  |                      |
|                     | ot married  |                        |                           |                |                 |                  |                      |
| 2. During           | the last 3 years, have yo   | ou lived anywhere      | other than where you liv  | ve now?        |                 |                  |                      |
| ✓ No                |   |                        |                           |                |                 |                  |                      |
| L Ye                | es. List all of the places yo                                     | ou lived in the last s | 3 years. Do not include v | vhere you live | now.            |                  |                      |
| De                  | ebtor 1:  |                        | Dates Debtor 1 lived      | Debtor 2:      |                 |                  | Dates Debtor 2 lived |
|                     |   |                        | there                     |                |                 |                  | there                |
|                     |   |                        |                           | Same a         | s Debtor 1      |                  | Same as Debtor 1     |
|                     |   |                        |                           | _              |                 |                  | _                    |
| N                   | umber Street  |                        | From                      | Number Str     | eet             |                  | From                 |
| _                   |   |                        | То                        | •              |                 |                  | To                   |
| Ci                  | ty State  | Zip Code               |                           | City           | State           | Zip Code         |                      |
|                     |   | <u> </u>               |                           | Same a         | s Debtor 1      |                  | Same as Debtor 1     |
|                     |   |                        |                           | _              |                 |                  | _                    |
| Ni                  | umber Street  |                        | From                      | Number Str     | eet             |                  | From                 |
| _                   |   |                        | То                        |                |                 |                  | To                   |
| Ci                  | ty State  | Zip Code               |                           | City           | State           | Zip Code         |                      |
|                     |   |                        |                           | -              |                 |                  |                      |
|                     | he last 8 years, did you e<br><i>ories</i> include Arizona, Calif |                        |                           |                |                 |                  |                      |
| <b>✓</b> No         |   |                        |                           |                |                 |                  |                      |
| Yes                 | . Make sure you fill out S  | chedule H: Your C      | odebtors (Official Form   | 106H).         |                 |                  |                      |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 39 of 67

Case number (if known)

Robinson

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$33449.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$36911.00 Wages, For last calendar year: commissions, commissions, 2015 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$34000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2015 For the calendar year before that: (January 1 to December 31, 2014

Debtor 1 Shemika

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 40 of 67

Robinson Debtor 1 Shemika \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors

Other

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 41 of 67

| or 1              | Shemika                                |  |  | Ro                                       | binson  | Case number                                  | (if known)  |
|-------------------|--|--|--|--|---|--|---|
|                   | First Name                             |  | Middle Name  | La:                                      | st Name                                       |  |   |
| nsi<br>com<br>age | ders include your<br>porations of whic | relatives; a<br>h you are a<br>for a busir | any general partner<br>an officer, director,<br>ness you operate a | s; relatives of any<br>person in control | general partners; par<br>, or owner of 20% or | tnerships of which y<br>more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| <b>✓</b>          | No                                     |  |  |  |   |  |   |
|                   | Yes. List all pag                      | yments to                                  | an insider.  | Dates of                                 | Total amount                                  | Amount you                                   | Reason for this payment   |
|                   |  |  |  | payment                                  | paid  | still owe                                    |   |
|                   | Insider's Name                         |  |  |  |   |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
| _                 | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | Insider's Name                         |  |  |  |   |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
|                   |  | 0: :                                       | 7: 0 1   |  |   |  |   |
|                   | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | No                                     |  | aranteed or cosigne  | ·  | Total amount paid                             | Amount you still owe                         | Reason for this payment  Include creditor's name  |
|                   | Insider's Name                         |  |  |  | <u> </u>                                      |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
| _                 | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | Insider's Name                         |  |  |  |   |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
|                   |  |  |  |  |   |  |   |
|                   | City                                   | State                                      | Zip Code   |  |   |  |   |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 42 of 67

Debtor 1 Shemika Robinson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 43 of 67

| 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?    No  | Debt | tor 1 Shemika                                      | Robinson                      | Case number (if known)                        |                        |
|---|------|--|-------------------------------|---|------------------------|
| accounts or refuse to make a payment because you owed a debt?  No Yes Fill in the details.  Describe the action the creditor took  Date action was taken  Number Street  Last 4 digits of account number: XXXX-  City State Zip Code  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court- appointed receiver, a custodian, or another official?  No Yes  Part S: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Describe the gifts  Describe the gifts  Person to Whom You Gave the Gift  Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code |      | First Name Middle Name                             | Last Name                     |   |                        |
| Describe the action the creditor took   | 11.  | accounts or refuse to make a payment because y     |                               | eank or financial institution, set off any am | ounts from your        |
| Describe the action the creditor took   Date action   Amount  |      | Yes. Fill in the details.                          |                               |   |                        |
| Last 4 digits of account number: XXXX-  |      |  | Describe the action th        |   | Amount                 |
| Last 4 digits of account number: XXXX-    City   State   Zip Code   |      | Creditor's Name                                    | -                             |   |                        |
| City   State   Zip Code   |      | Number Street                                      | -                             |   |                        |
| 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?    No  |      |  | _ Last 4 digits of account    | number: XXXX-                                 |                        |
| appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Sitts with a total value of more than \$600 per person?  Bescribe the gifts  Person to Whom You Gave the Gift  Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code   |      | City State Zip Code                                | -                             |   |                        |
| Yes   | 12.  |  |                               | possession of an assignee for the benefit o   | of creditors, a court- |
| Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?    No  |      | <b>≝</b>   |                               |   |                        |
| 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?    No  |      | Yes  |                               |   |                        |
| ✓ No   ✓ Yes. Fill in the details for each gift.   Gifts with a total value of more than \$600 per person   Person to Whom You Gave the Gift   Number Street   City State Zip Code   Person's relationship to you    Person to Whom You Gave the Gift  Number Street  City State Zip Code   | Part | 5: List Certain Gifts and Contributions            |                               |   |                        |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code   | 13.  | Within 2 years before you filed for bankruptcy, di | d you give any gifts with a t | otal value of more than \$600 per person?     |                        |
| Person to Whom You Gave the Gift  Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code  |      |  |                               |   |                        |
| Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code  |      |  | Describe the gifts            | gave the                                      | Value                  |
| Number Street  City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code  |      |  |                               |   |                        |
| City State Zip Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code   |      | Person to Whom You Gave the Gift                   | -<br>-                        |   |                        |
| Person's relationship to you  Person to Whom You Gave the Gift  Number Street  City State Zip Code  |      | Number Street                                      | _                             |   |                        |
| Person to Whom You Gave the Gift  Number Street  City State Zip Code  |      | City State Zip Code                                | -                             |   |                        |
| Number Street  City State Zip Code  |      | Person's relationship to you                       |                               |   |                        |
| City State Zip Code   |      | Person to Whom You Gave the Gift                   | -                             | -   |                        |
| City State Zip Code   |      |  | _                             |   |                        |
|   |      |  | _                             |   |                        |
| . 2.22 2.12   |      | City State Zip Code Person's relationship to you   |                               |   |                        |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 44 of 67

| btor 1   | Shemika  |                                | Robinson                         | Case number (if know    | vn)                   |                    |
|----------|--|--------------------------------|----------------------------------|-------------------------|-----------------------|--------------------|
|          | First Name M   | liddle Name                    | Last Name                        | <del></del>             |                       |                    |
|          |  |                                |                                  |                         |                       |                    |
| Wi       | thin 2 years before you filed for b  | ankruptcy, did                 | you give any gifts or contributi | ons with a total value  | of more than \$600    | to any charity?    |
| <b>V</b> | No No  |                                |                                  |                         |                       |                    |
| F        | l<br>Yes. Fill in the details for each g   | ift or contributio             | on.                              |                         |                       |                    |
| _        | -  | •                              |                                  |                         |                       |                    |
|          | Gifts or contributions to chariti<br>that total more than \$600  | ies                            | Describe what you contrib        | uted                    | Date you contributed  | Value              |
|          | that total more than \$000   |                                |                                  |                         | Contributed           |                    |
|          |  |                                |                                  |                         |                       |                    |
|          | Charity's Name   |                                |                                  |                         |                       |                    |
|          | -  |                                |                                  |                         |                       |                    |
|          |  |                                |                                  |                         |                       |                    |
|          | Number Street  |                                |                                  |                         |                       |                    |
|          | City State   | Zip Code                       |                                  |                         |                       |                    |
|          | City State   | Zip Code                       |                                  |                         |                       |                    |
| 6:       | List Certain Losses  |                                |                                  |                         |                       |                    |
|          | hin 1 year before you filed for ba<br>nbling?<br>No  | inkruptcy or sin               | се уои піед тог рапкгиртсу, діс  | a you lose anything bed | cause of theπ, fire,  | other disaster, or |
| Ī        | Yes. Fill in the details.  |                                |                                  |                         |                       |                    |
|          | Describe the property you lost   | and                            | Describe any insurance co        | verage for the loss     | Date of your          | Value of property  |
|          | how the loss occurred  |                                | Include the amount that insu     | rance has paid. List    | loss                  | lost               |
|          |  |                                | pending insurance claims on      | line 33 of Schedule     |                       |                    |
|          |  |                                | A/B: Property.                   |                         |                       |                    |
|          |  |                                |                                  |                         |                       |                    |
| 7:       | List Certain Payments or Tra   |                                |                                  |                         |                       |                    |
|          | No   |                                |                                  |                         |                       |                    |
| ✓        | Yes. Fill in the details.  |                                |                                  |                         |                       |                    |
|          |  |                                | Description and value of ar      | ny property             | Date payment          |                    |
|          |  |                                | transferred                      |                         | or transfer           | Amount of          |
|          |  |                                |                                  |                         | _                     | Amount of payment  |
|          | Semrad Law Firm  |                                | Attorney's Fee - 0.00            |                         | was made              | payment            |
|          | Person Who Was Paid<br>20 S. Clark Street  |                                | Automicy 3 Fee 0.00              |                         | was made<br>12/1/2016 |                    |
|          | 20 O. Olaik Gliect   |                                | Automoy 3 r cc 0.00              |                         |                       | payment            |
|          | Number Street  |                                | 7 money 31 65 0.00               |                         |                       | payment            |
|          | Number Street  |                                | Automoy 31 cc 0.00               |                         |                       | payment            |
|          | Number Street  28th Floor  |                                | Automoy 31 cc 0.00               |                         |                       | payment            |
|          | 28th Floor Chicago Illinois  | 60603                          | Automoy 3 1 dc 0.00              |                         |                       | payment            |
|          | 28th Floor   | 60603<br>Zip Code              | Automoy 3 Fee 0.00               |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State   |                                | Automoty 3 Fee 0.00              |                         |                       | payment            |
|          | 28th Floor Chicago Illinois  |                                | Automoy 3 rec 0.00               |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State Email or website address  | Zip Code                       | Automoty 3 Fee 0.00              |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State  Email or website address None  | Zip Code                       | Automoty 3 rec 0.00              |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State  Email or website address None  | Zip Code                       | Automoty 3 rec 0.00              |                         |                       | payment            |
|          | 28th Floor  Chicago Illinois City State  Email or website address None  Person Who Made the Payment, i   | Zip Code                       | Automoty 3 rec 0.00              |                         |                       | payment            |
|          | 28th Floor  Chicago Illinois  City State  Email or website address  None  Person Who Made the Payment, i   | Zip Code                       | Automoty 8 rec 6.00              |                         |                       | payment            |
|          | 28th Floor  Chicago Illinois City State  Email or website address None  Person Who Made the Payment, i   | Zip Code                       | Automoty 8 rec 6.00              |                         |                       | payment            |
|          | 28th Floor  Chicago Illinois City State  Email or website address None  Person Who Made the Payment, i   | Zip Code                       | Automoty 8 rec 6.00              |                         |                       | payment            |
|          | 28th Floor  Chicago Illinois City State  Email or website address None  Person Who Made the Payment, i   | Zip Code                       | Automoty 8 rec 6.00              |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payment, i  Person Who Was Paid  Number Street  City State | Zip Code                       |                                  |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payment, i  Person Who Was Paid  Number Street             | Zip Code                       |                                  |                         |                       | payment            |
|          | 28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payment, i  Person Who Was Paid  Number Street  City State | Zip Code  if Not You  Zip Code |                                  |                         |                       | payment            |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 45 of 67

| Deb | tor 1 | Shemika<br>First Name  | Middle Name             | Robinson<br>Last Name                                 | Case number (if known)    |                                     |                                  |
|-----|-------|--|-------------------------|---|---------------------------|-------------------------------------|----------------------------------|
| 17. | help  | hin 1 year before you filed for pyou deal with your creditors not include any payment or tran                | s or to make payment    | s to your creditors?                                  | ır behalf pay or transfer | any property to ar                  | nyone who promised to            |
|     | Ц     | Yes. Fill in the details.  |                         | Description and value of any transferred              | y property                | Date payment or transfer was made   | Amount of payment                |
|     |       | Person Who Was Paid  Number Street   |                         |   |                           |                                     |                                  |
|     |       | - Sueet  |                         |   |                           |                                     |                                  |
|     |       | City State   | Zip Code                |   |                           |                                     |                                  |
|     | and   | No Yes. Fill in the details.   | listed on this statemen | t.  Description and value of any property transferred |                           | / property or<br>ceived or debts pa | Date<br>aid transfer was<br>made |
|     |       | Person Who Received Transfe  | r                       |   | iii oxonange              |                                     |                                  |
|     |       | Number Street  |                         |   |                           |                                     |                                  |
|     |       | City State<br>Person's relationship to you   | Zip Code                |   |                           |                                     |                                  |
|     |       | Person Who Received Transfe  | r                       |   |                           |                                     |                                  |
|     |       | Number Street  |                         |   |                           |                                     |                                  |
|     |       | City State<br>Person's relationship to you   | Zip Code                |   |                           |                                     |                                  |
| 19. | ben   | hin 10 years before you filed reficiary? ese are often called asset-protection. No Yes. Fill in the details. |                         | ou transfer any property to a                         | self-settled trust or sim | ilar device of whic                 | h you are a                      |
|     |       |  |                         | Description and value of the                          | ne property transferred   |                                     | Date<br>transfer was<br>made     |
|     |       | Name of trust  |                         |   |                           |                                     |                                  |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 46 of 67

Robinson Debtor 1 Shemika Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred CHASE Checking XXXX-5010 11/26/2016 \$ 268.00 Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street

City

State

State

Zip Code

City

Zip Code

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 47 of 67

Robinson Debtor 1 Shemika Case number (if known) Middle Name First Name Identify Property You Hold or Control for Someone Else Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 48 of 67

| Deb  | tor 1        | Shemika                           |                  |                    | Ro            | binson          | Cas               | se number <i>(ii</i> | known)        |                 |                 |
|------|--------------|-----------------------------------|------------------|--------------------|---------------|-----------------|-------------------|----------------------|---------------|-----------------|-----------------|
|      |              | First Name                        |                  | Middle Name        | Las           | t Name          |                   |                      | -             |                 |                 |
| 26.  | Hav          | e you been a part                 | y in any judic   | cial or administr  | ative proce   | eding under     | any environmer    | ntal law? In         | clude settler | ments and ord   | ers.            |
|      | Ħ            | Yes. Fill in the det              | tails            |                    |               |                 |                   |                      |               |                 |                 |
|      | ш            | 103.1 111 111 110 00              | idiis.           |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    | Court or ag   | ency            |                   | Nature o             | of the case   |                 | Status of the   |
|      |              | 0                                 |                  |                    |               |                 |                   |                      |               |                 | case            |
|      |              | Case title                        |                  |                    |               |                 |                   |                      |               |                 | Pending         |
|      |              |                                   |                  |                    | Court Name    |                 |                   |                      |               |                 | r or amy        |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 | On appeal       |
|      |              | Case number                       |                  |                    | NumberStree   | et              |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 | Concluded       |
|      |              |                                   |                  |                    | City          | State           | Zip Code          |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
| Part | <b>3</b> 11: | Give Details Al                   | oout Your E      | Business or Co     | nnections     | to Any Bu       | siness            |                      |               |                 |                 |
| 27.  | With         | nin 4 years before  A sole propri |                  |                    |               |                 | have any of the   | _                    |               | o any busines   | s?              |
|      |              | A member of                       | f a limited liak | oility company (L  | LC) or limite | ed liability pa | artnership (LLP)  |                      |               |                 |                 |
|      |              | A partner in a                    |                  |                    | •             | , ,             | ,                 |                      |               |                 |                 |
|      |              |                                   | -                | naging executiv    | o of a corn   | oration         |                   |                      |               |                 |                 |
|      |              | _                                 |                  |                    | -             |                 |                   |                      |               |                 |                 |
|      |              | An owner of                       | at least 5% c    | of the voting or e | quity securi  | ties of a corp  | poration          |                      |               |                 |                 |
|      |              | No. None of the a                 | ahove annlie     | s Go to Part 12    |               |                 |                   |                      |               |                 |                 |
|      | $\mathbf{Y}$ |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      | Ш            | Yes. Check all the                | at apply abo     | ve and till in the | details belo  | w for each t    | ousiness.         |                      |               |                 |                 |
|      |              |                                   |                  |                    | Descr         | ibe the natu    | ure of the busine | ess                  |               |                 | number Do not   |
|      |              |                                   |                  |                    |               |                 |                   |                      | include So    | cial Security r | number or ITIN. |
|      |              |                                   |                  |                    | _             |                 |                   |                      | EIN:          |                 |                 |
|      |              | Business Name                     |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              | Number Street                     |                  |                    | _             |                 |                   |                      | Dates husi    | ness existed    |                 |
|      |              | Number Street                     |                  |                    | Namo          | of account      | ant or bookkeep   | nor.                 | Dates busi    | iless existed   |                 |
|      |              | 0.1                               | 01-1-            | 7' - 0 - 1 -       |               | or account      | ant or bookkeep   | ) <del>C</del> I     |               |                 |                 |
|      |              | City                              | State            | Zip Code           |               |                 |                   |                      | From          | To              |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    | Descr         | ibe the natu    | ure of the busine | ess                  |               |                 | number Do not   |
|      |              |                                   |                  |                    |               |                 |                   |                      | include So    | cial Security r | number or ITIN. |
|      |              |                                   |                  |                    | _             |                 |                   |                      | EIN:          |                 |                 |
|      |              | Business Name                     |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              | Normalia e C'                     |                  |                    | _             |                 |                   |                      | Dotoo bust    | noon ovieted    |                 |
|      |              | Number Street                     |                  |                    | N             | of opposite !   | ont or booking    | 201                  | Dates Dusi    | ness existed    |                 |
|      |              |                                   |                  |                    | mame<br>—     | or account      | ant or bookkeep   | per                  |               |                 |                 |
|      |              | City                              | State            | Zip Code           |               |                 |                   |                      | From          | To              |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    | Descr         | ibe the natu    | re of the busine  | ess                  | Employer I    | dentification i | number Do not   |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 | number or ITIN. |
|      |              |                                   |                  |                    |               |                 |                   |                      | EIN:          |                 |                 |
|      |              | Business Name                     |                  |                    | _             |                 |                   |                      | LIIV.         |                 |                 |
|      |              |                                   |                  |                    | _             |                 |                   |                      |               |                 |                 |
|      |              | Number Street                     |                  |                    |               |                 |                   |                      | Dates busi    | ness existed    |                 |
|      |              |                                   |                  |                    | Name          | of account      | ant or bookkeep   | per                  |               |                 |                 |
|      |              | City                              | State            | Zip Code           | _             |                 |                   |                      | From          | То              |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               | <del></del>     |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |
|      |              |                                   |                  |                    |               |                 |                   |                      |               |                 |                 |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 49 of 67

| Deb | otor 1     | Shemika   |              |  | Robinson                   | Case number (if known)   |
|-----|------------|---|--------------|--|----------------------------|--|
|     |            | First Name                                      |              | Middle Name                                    | Last Name                  |  |
| 28. |            | hin 2 years before<br>ditors, or other pa<br>No |              | r bankruptcy, did you                          | give a financial statem    | ent to anyone about your business? Include all financial institutions,   |
|     | F          | Yes. Fill in the det                            | tails below. |  |                            |  |
|     | ш          |   |              |  | Date issued                |  |
|     |            |   |              |  | Date Issued                |  |
|     |            | Name  |              |  | MM/DD/YYYY                 | -  |
|     |            | Name  |              |  | , 22,                      |  |
|     |            | Number Street                                   |              |  |                            |  |
|     |            |   |              |  |                            |  |
|     |            | City  | State        | Zip Code                                       |                            |  |
|     |            | •   |              | —р   |                            |  |
| Par | t 12:      | Sign Below                                      |              |  |                            |  |
|     | true a     | and correct. I undo<br>kruptcy case can         | erstand tha  | t making a false stat<br>es up to \$250,000, o | ement, concealing prop     | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|     |            |   | ure of Debto |  |                            | Signature of Debtor 2  |
|     |            | g   |              |  |                            | Date   |
|     |            | Date 1  | 12/1/2016    |  |                            | Date   |
|     | D: 4       |   |              | V 04-4 4 F                                     |                            | iduals Filing for Bordinanton (Official Forms 407)0  |
|     | Dia y      | ou attach additior                              | iai pages to | Your Statement of F                            | Inancial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)?  |
|     | <b>✓</b> N | lo  |              |  |                            |  |
|     | $\square$  | 'es   |              |  |                            |  |
|     | Did y      | ou pay or agree to                              | pay someo    | ne who is not an atto                          | orney to help you fill out | bankruptcy forms?  |
|     | V N        | lo  |              |  |                            |  |
|     |            | es. Name of person                              | n            |  |                            | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 50 of 67

| Fill in this information to identify your case: |                           |             |                              |   |  |  |
|---|---------------------------|-------------|------------------------------|---|--|--|
| Debtor 1  | Shemika                   |             | Robinson                     |   |  |  |
|   | First Name                | Middle Name | Last Name                    |   |  |  |
| Debtor 2  |                           |             |                              |   |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |   |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |   |  |  |
| Case number (If known)                          |                           |             | . ,                          | — |  |  |

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

creditors have claims secured by your property, or

Part 1: List Your Creditors Who Have Secured Claims

you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Roundpoint Mortgage Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 7743 S Sawyer Ave , Chicago, IL 60652 | Value: \$100,000.00 Retain the property and [explain]: Surrender the property. No. Creditor's name: CAPITAL ONE AUTO FINAN Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. 2014 Dodge Avenger: REAFFIRM securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and

[explain]:

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 51 of 67

| Debtor  | Shemika  |                           | Robinson                   | Case number (if                |   |
|---------|--|---------------------------|----------------------------|--------------------------------|---|
| 1       | First Name   | Middle Name               | Last Name                  | known)                         |   |
| Part 2: | List Your Unexpired Pers   | onal Property Leases      | <b>S</b>                   |                                |   |
| informa |  | tate leases. Unexpired le | eases are leases that are  | still in effect; the lease per | es (Official Form 106G), fill in the iod has not yet ended. You may |
| Des     | scribe your unexpired persona                                      | l property leases         |                            | Will the                       | e lease be assumed?   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            | _                              |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            |                                |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            | _                              |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            |                                |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            |                                |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            |                                |   |
| Les     | sor's name:  |                           |                            | ☐ No                           |   |
|         | cription of leased<br>perty:                                       |                           |                            | _                              |   |
| Part 3: | Sign Below   |                           |                            |                                |   |
| Unde    | er penalty of perjury, I declare<br>erty that is subject to an une |                           | y intention about any prop | erty of my estate that secu    | res a debt and any personal   |
| *       | /s/ Shemika Robinson   |                           | ×                          |                                |   |
| Si      | gnature of Debtor 1  |                           | Signatu                    | re of Debtor 1                 |   |
| Di      | ate 12/1/2016<br>MM/DD/YYYY  |                           | Date _<br>N                | MM/DD/YYYY                     |   |

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 52 of 67

B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re | Shemika Robinson   |                                  | Case No.   |                                |
|-------|--|----------------------------------|--|--------------------------------|
| _     | Debtor   |                                  | <del>-</del>   | (If known)                     |
|       |  |                                  | Chapter  | Chapter 7                      |
|       | DISCLOSURE OF  | COMPENSAT                        | ION OF ATTORNEY  | FOR DEBTOR                     |
| 1.    | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of        | the petition in bankruptcy, or agreed  | to be paid to me, for services |
|       | For legal services, I have agreed to ac  | cept                             |  | \$1,465.00                     |
|       | Prior to the filing of this statement I h  | ave received                     |  | \$0.00                         |
|       | Balance Due  |                                  |  | \$1,465.00                     |
| 2.    | . The source of the compensation paid  | to me was:                       |  |                                |
|       | <b>✓</b> Debtor  | Other (spe                       | cify)  |                                |
| 3.    | . The source of the compensation paid  | to me is:                        |  |                                |
|       | <b>✓</b> Debtor  | Other (spe                       | cify)  |                                |
| 4.    | I have not agreed to share the abmembers and associates of my la   | ove-disclosed compens<br>w firm. | ation with any other person unless t   | hey are                        |
|       |  | firm. A copy of the agre         | n with a other person or persons wheement, together with a list of the na        |                                |
| 5.    | . In return for the above-disclosed fee,<br>a. Analysis of the debtor's finan-<br>bankruptcy;                  |                                  | legal service for all aspects of the ba<br>ring advice to the debtor in determin |                                |
|       | b. Preparation and filing of any p   | petition, schedules, stat        | ements of affairs and plan which ma  | y be required;                 |
|       | c. Representation of the debtor  | at the meeting of credito        | ors and confirmation hearing, and an   | y adjourned hearings thereof;  |
| 6.    | . By agreement with the debtor(s), the a   | above-disclosed fee doe          | es not include the following services  | :                              |
|       |  |                                  |  |                                |
|       |  | CERT                             | IFICATION  |                                |
|       | I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.                               | e statement of any agre          | ement or arrangement for payment to  | o me for representation of the |
|       | 12/1/2016  |                                  | /s/ Alex Nohr  |                                |
|       | Date   |                                  | Signature of Attorney  |                                |
|       |  |                                  | Semrad Law Firm  |                                |
|       |  |                                  | Name of law firm   | _                              |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | 5 filing fee       |  |
|---|-------|--------------------|--|
|   | \$75  | administrative fee |  |
| + | \$15  | trustee surcharge  |  |
|   | \$335 | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
<a href="mailto:20AndDebtCounselors.aspx">20AndDebtCounselors.aspx</a>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 57 of 67

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Robinson, Shemika  Debtor(s)               | Case No   | Case No                              |  |  |
|-----------------|--|---|--------------------------------------|--|--|
|                 | Bastor(g)                                  | Chapter.  | Chapter7                             |  |  |
|                 | VERIFIC                                    | CATION OF CREDITOR MAT                                  | TRIX                                 |  |  |
| Ti<br>knowledge | he above named Debtors hereby verify<br>e. | that the attached list of creditors is tr               | rue and correct to the best of their |  |  |
| Date:           | 12/1/2016                                  | /s/ Robinson, Sh<br>Robinson, Sherr<br>Signature of Dek | nika                                 |  |  |

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign



### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 59 of 67

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 12/01/2016      |        |
|-----------------------|--------|
| Client                | Client |
| Attorney Morshell Das | he     |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 60 of 67

| Debtor 1 Shemika  |   |  | number (if known)   |
|---|---|--|---|
| First Name  |   | Name   |   |
| Part 6: Answer These Qu   | estions for Reporting Purposes  |  |   |
| 16. What kind of debts do you have?   | "incurred by an individual pr<br>No. Go to line 16b.<br>Yes. Go to line 17.<br>16b. Are your debts primarily bu   | rimarily for a personal, famusiness debts? Business debts? Business destment or through the op   | debts are debts that you incurred to obtain peration of the business or investment.   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund  No.  |  | ny exempt property is excluded and administrative ute to unsecured creditors?   |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you<br>estimate your assets<br>to be worth?   | □ \$0-\$50,000<br>□ \$50,001-\$100,000<br>☑ \$100,001-\$500,000<br>□ \$500,001-\$1 million  | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50   | million \$1,000,000,001-\$10 billion 0 million \$10,000,000,001-\$50 billion  |
| <sup>20.</sup> How much do you<br>estimate your<br>liabilities to be?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50   | million \$1,000,000,001-\$10 billion 0 million \$10,000,000,001-\$50 billion  |
| Part 7: Sign Below  |   |  |   |
|   | correct.  If I have chosen to file under Chap of title 11, United States Code. I us under Chapter 7.  If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false statem. | ter 7, I am aware that I may<br>nderstand the relief availab<br>did not pay or agree to pay<br>d and read the notice requi<br>the chapter of title 11, Uni<br>nent, concealing property,<br>e can result in fines up to \$ | perjury that the information provided is true and by proceed, if eligible, under Chapter 7, 11,12, or 10 ble under each chapter, and I choose to proceed by someone who is not an attorney to help me fill ired by 11 U.S.C. § 342(b). Ited States Code, specified in this petition. or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 years, or |
|   | /s/ Shemika Robinson Signature of Debtor 1  | *  | Signature of Debtor 2   |
|   | Executed on 12/1/2016<br>MM / DD / Y  | <del></del>  | Executed on   |

### Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 61 of 67

| Fill in this information to identify your case: |            |             |                              |  |  |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1  | Shemika    |             | Robinson                     |  |  |
|   | First Name | Middle Name | Last Name .                  |  |  |
| Debtor 2  |            |             |                              |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                    |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois (State) |  |  |
| Case number<br>(If known)                       | •          |             | (State)                      |  |  |

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part | 1: Sign Below  |  |
|------|--|--|
|      | Did you pay or agree to pay someone who is NOT an attorney to h    | nelp you fill out bankruptcy forms?  |
|      | <b>y</b> №   |  |
|      | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and<br>Signature (Official Form 119). |
|      |  |  |
|      |  |  |
|      | Under penalty of perjury, I declare that I have read the summary a | and schedules filed with this declaration and  |
| ×    | /s/ Shemika Robinson   | ×  |
|      | Signature of Debtor 1  | Signature of Debtor 2  |
| ı    | Date 12/1/2016<br>MM/DD/YYYY                                       | Date MM/DD/YYYY  |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 62 of 67

| Debtor  | 1 Shemika                          |                                       | Robinson                   | Case number (if known)  |
|---------|------------------------------------|---------------------------------------|----------------------------|---|
|         | First Name                         | Middle Name                           | Last Name                  |   |
|         | ithin 2 years l<br>editors, or otl |                                       | ou give a financial state  | ment to anyone about your business? Include all financial institutions,   |
|         | No<br>Yes. Fill in t               | he details below.                     |                            |   |
|         |                                    |                                       | Date issued                |   |
|         | Name                               | · · · · · · · · · · · · · · · · · · · | MM/DD/YYYY                 | <del></del>   |
| •       | Number S                           |                                       | _ ·                        | •   |
|         |                                    |                                       |                            |   |
|         | City                               | State Zip Code                        |                            |   |
| Part 12 | Sign Belo                          | 14/                                   |                            |   |
|         |                                    |                                       |                            | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|         | Ţ                                  | Signature of Debtor 1                 |                            | Signature of Debtor 2   |
|         | ł                                  | Date 12/1/2016                        |                            | Date  |
| Did     | you attach ad                      | ditional pages to Your Statement of   | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)?  |
| V       | No                                 |                                       |                            |   |
| □       | Yes                                |                                       |                            |   |
| Did     | you pay or ag                      | ree to pay someone who is not an at   | torney to help you fill ou | t bankruptcy forms?   |
| V       | No                                 |                                       |                            |   |
|         | Yes. Name of                       | person                                |                            | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).                            |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 63 of 67

| btor <u>Shemika</u>   |   | Robinson   | Case number (if  |
|---|---|--|--|
| First Name  | Middle Name   | Last Name  | known)   |
| 2: List Your Unexpired  | Personal Property Leas  | es   |  |
| any unexpired personal prop<br>rmation below. Do not list re<br>ime an unexpired personal p | eal estate leases. Unexpired  | d leases are leases that a   | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2).  |
| Describe your unexpired pe  | rsonal property leases  |  | Will the lease be assumed?   |
| Lessor's name:  |   | ,  | No No Yes  |
| Description of leased property:   | - The second companies of the second | American construence of the property and the second | entimonographic designation of the contraction of t |
| _essor's name:  |   | A CONTRACTOR AND AN ANTICONOR MAKE THE PROMETER AND AN ANTICONOR AND ANTICONOR AND   | ☐ No<br>☐ Yes  |
| Description of leased property:   |   | and and the second of the seco | т често по се се се тото обще выпованения по често се не се  |
| .essor's name:  |   |  | □ No<br>□ Yes  |
| Description of leased property:   |   |  | _  |
| essor's name:   |   |  | □ No □ Yes   |
| Description of leased property:   |   |  | <b></b>  |
| essor's name:   |   |  | □ No<br>□ Yes  |
| Description of leased property:   |   |  |  |
| essor's name:   | •••   |  | □ No<br>□ Yes  |
| description of leased roperty:  | N . and   |  |  |
| essor's name:   |   |  | ☐ No<br>☐ Yes  |
| escription of leased roperty:   |   |  |  |
| : Sign Below  | er det i a i a Signa erra versa erra erra erra erra erra erra erra  |  |  |
| der penalty of perjury, I dec<br>operty that is subject to an                               |   | ny intention about any pi  | operty of my estate that secures a debt and any personal   |
| /s/ Shemika Robinson  | 70  | *  |  |
| Signature of Debtor 1   |   | Signa  | ature of Debtor 1  |
| Date 12/1/2016<br>MM/DD/YYYY  |   | Date   | MM/DD/YYYY   |

Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 64 of 67

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Hobinson, Snemika                               | Case No   |                                       |
|-----------------|---|---|---------------------------------------|
|                 | Debtor(s)                                       | Case NO.  |                                       |
|                 |   | Chapter.  | Chapter7                              |
|                 | VERIFICAT                                       | ION OF CREDITOR MAT                                     | TRIX                                  |
| Tr<br>knowledge | ne above named Debtors hereby verify that<br>e. | t the attached list of creditors is tr                  | ue and correct to the best of their . |
| Date:           | 12/1/2016                                       | /s/ Robinson, Sh<br>Robinson, Sherr<br>Signature of Deb | nika                                  |

# Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 65 of 67

| Debtor 1 Shemika First Name   | Robinson Middle Name Last Name  | Case number (if known)                |                         |
|---|---|---------------------------------------|-------------------------|
| That Name   | Last Haire  | Column A<br><b>Debtor 1</b>           | Column B Debtor 2 or    |
| 8. Unemployment compensation  Do not enter the amount if you contend under the Social Security Act. Instead, lis  |   | \$0.00                                | non-filing spouse       |
| For your angues   | \$0.00  |                                       |                         |
| For your spouse   | \$0.00  |                                       |                         |
| <ol> <li>Pension or retirement income. Do not<br/>benefit under the Social Security Act.</li> </ol>   | include any amount received that was a .                                  | \$ <u>0.00</u>                        | •                       |
| 10.Income from all other sources not lis<br>amount. Do not include any benefits rece<br>payments received as a victim of a war or<br>international or domestic terrorism. If nec<br>page and put the total below. | eived under the Social Security Act or rime, a crime against humanity, or |                                       |                         |
|   |   |                                       |                         |
| Total amounts from separate pages, if an  | у.  | +\$0.00                               | +                       |
| 11. Calculate your total current monthly  | y income. Add lines 2 through 10 for                                      | \$3,388.78                            | = \$3,388.78            |
| each column. Then add the total for Column  | n A to the total for Column B.  | ·                                     |                         |
|   |   | <u> </u>                              | Total current           |
| Part 2: Determine Whether the Mea   | ans Test Annlies to You   |                                       | monthly income          |
| 12. Calculate your current monthly incom  |   |                                       |                         |
| 12a. Copy your total current monthly inco   | •   | Copy line                             | 11 here → \$3,388.78    |
| Multiply by 12 (the number of mon-  | ths in a year).   |                                       | X 12                    |
| 12b. The result is your annual income for   | this part of the form.  |                                       | 12b. <u>\$40,665.36</u> |
|   |   |                                       |                         |
| 13 Calculate the median family income to  | grad Maria  |                                       |                         |
| Fill in the state in which you live.  | Illinois  ***********************************                             | n.                                    |                         |
| Fill in the number of people in your house  | ehold.  | ·                                     |                         |
| Fill in the median family income for your shousehold.   | state and size of   |                                       | 13. \$50,133.00         |
| To find a list of applicable median income instructions for this form. This list may als  |   |                                       |                         |
| 14. How do the lines compare?   |   |                                       |                         |
| 14a. Line 12b is less than or equal to Go to Part 3.  | line 13. On the top of page 1, check bo                                   | ox 1, There is no presumption of abu  | se.                     |
| 14b. Line 12b is more than line 13. (   | On the top of page 1, check box 2, The p                                  | presumption of abuse is determined    | by Form 122A-2.         |
| Part 3: Sign Below  |   |                                       |                         |
| Tarto. Oigit Delow  |   |                                       |                         |
| By signing here, I declare under penalty  | of perjury that the information on this sta                               | atement and in any attachments is tru | re and correct.         |
| 4   |   | ,                                     |                         |
|   | <u> </u>  | •                                     |                         |
| /s/ Shemika Robinson Signature of Debtor 1  | <u> </u>  |                                       |                         |
| Signature of Debtor 1   |   | Signature of Debtor 2                 |                         |
| Date 12/1/2016<br>MM/DD/YYYY  |   | Date 12/1/2016<br>MM/DD/YYYY          |                         |
| If you checked line 14a, do NOT fill ou<br>If you checked line 14b, fill out Form 1   |   |                                       |                         |

Roundpoint Mortgage 5032 parkway plaza blvd CHARLOTTE , NC 28217

FED LOAN SERV Po Box 530210 Department of Education Atlanta, GA 30353

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO , TX 75093

AMERICAN CREDIT ACCEPT 961 E MAIN ST SPARTANBURG, SC 29302

HWARFIELD 4620 WOODLAND CORP TAMPA , FL 33614

CAPITAL ONE BANK (USA), N.A. PO Box 71083 c/o Ashley Boswell Charlotte , NC 28272

SYNCB/GAP P.O. BOX 29116 SHAWNEE MISSIO , KS 66201

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA 23502

ENHANCED RECOVERY CO 8014 Bayberry Road Jacksonville , FL 32256

MCCARTHY BURGESS & WOL 26000 Cannon Rd Bedford , OH 44146

COMENITY BANK/NWYRK&CO 220 W SCHROCK RD WESTERVILLE , OH 43081 Case 16-38009 Doc 1 Filed 12/01/16 Entered 12/01/16 12:52:14 Desc Main Document Page 67 of 67

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